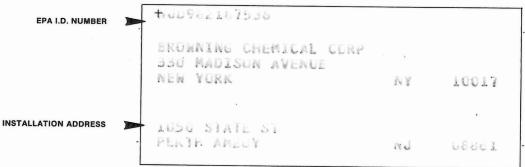


ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act(RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.



EPA Form 8700-12B (4-80)

06/30/87

Please wint or type with ELITE type (12 characters per inch) in the unshaded areas only

Form Approved. OMB No. 2050-0028. Expires 10-31-91 GSA No. 0246-EPA-01

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

Date Received (For Official Use Only)

A. First Notification	B. Subsequent Notif	ication	MITIC	C. Installation	s EPA ID Number	36
II. Name of Installation (Include		site name)	11 0 0	1100		
BROWNING	1 10111111111	ICAL				T
III. Location of Installation (Ph		Box or Route N	umber)			A Comment
Street			0.5 (6) (6) (6)			
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Street (continued)						
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City or Town			State	ZIP Code		
PERTH AN	11601111		MP	1010181	0 1 - _	Jan West
County Code County Name						
MIDDE	ESEX		7			
IV. Installation Mailing Addres	is (See instructions)					
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City or Town			State	ZIP Code	(a) (A)	2 34 - 23
Whitepl	AINSI		MA	100	04-11	150 SI
V. Installation Contact (Perso	n to be contacted regard	ding waste activ	ities at site)	7		
Name (last)		(first)	EIN			
RIKIO WINI INI	5	THE	ED			
Job Title		Phone	Number (ar	rea code and nu	mber)	
OWNER		91	14 - 16	86-	0 3 0 0	
VI. Installation Contact Address						TO COMP.
A. Contact Address B. Street	or P.O. Box		LITIC	IN IN		
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White D	1 / / / / / V S	Distriction of the second	NA	106	0 7-1	
VII. Ownership (See instructi	ons)		Million sense and	THE RESERVE OF STREET		
A. Name of Installation's Leg						
BROWMING	3 LHEM	1 CAC				GCF CF
Street, P.O. Box, or Route N			T AT T			Marie Person
101 MES	T CHES	TER	AVE	WUL		
City or Town		***	State	ZIP Code	The second secon	
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WHITEP	LAINS		ner Type D.	Change of Own	er (Date Cha Month Da	

A. Hazardous Waste Activity A. Hazardous Waste Activity A. Hazardous Waste Activity A. Generator (See Instructions) A. Hazardous Waste Activity A. Generator (See Instructions) A. Generator (See Instructions) A. Generator (See Instructions) A. Generator Marketing to Burner in See Instructions (See Appendix Burner) A. Generator Marketing to Burner in Section (See Instructions) A. Generator Marketing to Burner in Section (See Instructions) A. Generator Marketing to Burner in Section (See Instructions) A. Generator Marketing to Burner in Section (See Instructions) A. Generator Marketing to Burner in Section (See Instructions) A. Generator Marketing to Burner in Section (See Instructions) A. Generator Marketing to Burner in Section (See Instructions) B. Used Oil Fuel Activities D. Other Marketing to Burner in Section (See Instructions) D. Other Marketing to Burner in Section (See Instructions) D. Other Marketing to Burner in Section (See Instructions) D. Other Marketing to Burner in Section (See Instructions) D. Secretary (See Instructions) D. Other Marketing to Burner in Section (See Instructions) D. Utility Boller D. Other Marketing to Burner in Section (See Instructions) D. Utility Boller D. Utility Bolle							1	1		Tuse	Only	П
Generator (See instructions) S. Treater, Storer, Disposer (at installation) Comments Commen	VIII. Type of Regulated Wast	e Activity (Mark	'X' in the app	ropriate boxe	s. Refer to	o instru	ction	is.)			72	34
Note: A permit is required for this activity: see instructions. b. 100 to 1000 kg/mo (220 - 2200 lbs.) c. Less than 100 kg/mo (220 - 2200 lbs.) c. Less than 100 kg/mo (220 lbs.) c. Less than 100 kg/mo (220 lbs.) c. Less than 100 kg/mo (220 lbs.) d. Hazardous Waste Fuel a. Generator Markeling to Burner b. Other Markelers c. Burner - Indicate device(s) - Type of Combustion Device c. Burner - Indicate device(s) - Ty	A. I	Hazardous Waste	Activity		A2.002	В.	Used	Oil F	uel A	ctivitie	es	
A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24) 1. Ignitable 2. Cornosive 3. Reactive 4. EP Toxic (D001) (D002) (D003) (D000) (D000) (U000) (U	a. Greater than 1000kg/mo b. 100 to 1000 kg/mo (220 c. Less than 100 kg/mo (22 2. Transporter (Indicate Mode in a. For own waste only b. For commercial purpose Mode of Transportation 1. Air 2. Rail 3. Highway 4. Water	0 (2,200 lbs.) - 2,200 lbs.) 20 lbs.) n boxes 1-5 below)	Note: A p this activi 4. Hazardou a. Gene b. Other Type 1. 2. 3.	permit is required ity; see instruction ity; see instruction us Waste Fuel erator Marketing or Marketers er – indicate devor Combustion Utility Boiler Industrial Boile Industrial Furnity; see it in the industrial Furnity; see it in the industrial Furnity; see it is required in the industrial Furnity; see instruction in the industrial function in th	d for ons. to Burner ice(s) - Device		a. b. c.	General Survival Surv	erator er Mark ner - in e of Co . Utilit . Indu ation Us	Market kerer adicate ambust ty Boild ustrial I ustrial I	e device e device tion De er Boiler Furnac il Fuel I	Burner e(s) - evice Markete
1. Ignitable 2. Corrosive 3. Reactive 4. EP Toxic (D001) (D002) (D003) (D003) (D000) (List specific EPA hazardous waste number(s) for the EP Toxic contaminant(s)) B. Listed Hazardous Wastes. (See 40 CFR 261.31 – 33. See instructions if you need to list more than 12 waste codes.) 1 2 3 4 5 6 7 8 9 10 11 12 C. Other Wastes. (State or other wastes requiring an I.D. number. See instructions.) 1 2 3 4 5 6 Certification 1 certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fines and imprisonment. Name and Official Title (type or print)						del.	The Age	1				
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EPA Form 8700-12 (Rev. 11-85) Reverse





ACKNOWLEDGEMENT OF NOTIFICATION

OF HAZARDOUS WASTE ACTIVITY

11/26/90

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER ->

NJD982187536

FACILITY NAME ->

BROWNING CHEMICAL

MAILING ADDRESS ->

707 W CHESTER AVE WHITE PLAINS, NY 10604

INSTALLATION ADDRESS ->

1050 STATE ST PERTH AMBOY, NJ 08861

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY REGION II
26 FEDERAL PLAZA
NEW YORK, NEW YORK 10278

ATTN: PERMITS ADMINISTRATION BRANCH, ROOM 505

TO: BROWNING FRED OWNER
BROWNING CHEMICAL
707 W CHESTER AVE
WHITE PLAINS, NY 10604

INTERACTIVE S2K RETRIEVAL

** S2K IS NOW READY FOR INTERACTIVE PROCESSING ** S2K0131/01- S2KPAD00 NOW BEING FORMATTED -S2K0212/01- SYSTEM 2000 RELEASE 11.6-01 S2KO213/00- COPYRIGHT (C) 1985 SAS INSTITUTE INC., CARY, N.C. 27512, U.S.A. -11/06/90 16:59:24 BEGIN SYSTEM 2000 - RELEASE 11.6-01 COPYRIGHT (C) 1985 SAS INSTITUTE INC., CARY, N.C. 27512, U.S.A. -JSER, HWDB:DBN IS HWDBDAT: USER, HWDB: DBN IS HWDBDAT: -556- OPENED....HWDBDAT 3 352091 11/05/1990 18:38:28 RINT CO WH C101 EQ NJD782187536: PRINT CO WH C101 EQ NJD982187536: 1* 02 2* NJ 101* NJD982187536 102* P 104* BROWNING CHEMICAL CORP

105* IRWIN PONTELL

106* 330 MADISON AVENUE - MAIL IN ADDRESS 107* NEW YORK 108* NY 109* 10017 110* 1050 STATE ST 111* PERTH AMBOY 112* 08861 113* 2128670600 114* 023 216* MIDDLESEX 1101* 1 1503* MATERIALS DISTRIBUTION & WAREHOUSE CO 230* C 202* 07/07/1987 1701* X 2701* D002 1601* 06/03/1987 ***

1603* 06/30/1987



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

04/08/2005

Region 2

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER: NJD982187536

INSTALLATION NAME:

ACETYLENE SUPPLY CO

INSTALLATION ADDRESS:

1050 STATE ST

PERTH AMBOY, NJ 08861

MAILING ADDRESS:

475 RTE 9

WOODBRIDGE, NJ 07095

EPA Form 8700-12AB (4-80)

USEPA - REGION 2 RCRA Programs Branch 290 Broadway, 22nd Floor New York, NY 10007-1866

ATTN: RCRA NOTIFICATIONS

Tel: (212) 637-4106 Fax: (212) 637-3056

TO: ACETYLENE SUPPLY CO

or Current Occupant

ATTN: WILLIAM GOODLIFFE

475 RTE 9

WOODBRIDGE, NJ 07095

10, 10, 231/28 (Owner)

OMB#: 2050-0028 Expires 1/31/2006

Call Kenneth muelles (605) 450-0400

SEND COMPLETED FORM TO:	United States Environmental	Protection	n Agency	PRODUCTION .						
The Appropriate State or EPA Regional Office.	RCRA SUBTITLE C SITE IDEN	TIFICAT	ION FORM	RA MH						
1. Reason for Submittal (See instructions on page 13.) MARK ALL BOX(ES) THAT APPLY	eason for Submittal: *To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities) *To provide Subsequent Notification of Regulated Waste Activity (to update site identification information) *As a component of a First RCRA Hazardous Waste Part A Permit Application *As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #) *As a component of the Hazardous Waste Report									
2. Site EPA ID Number (page 14)	,	PAID Number NJD 982 187536 .))2))2))2))2))2))2))2))2))2))2))2))2))2								
3. Site Name (page 14)	Name: ACETYLENE SUPPL	lame: ACETYLENE SUPPLY COMPANY								
4. Site Location	Street Address: 1050 STATE STREET									
(page 14)	City, Town, or Village: PERTH AMBO	γ	State: NJ							
	County Name: MIDDLESEX	Zip Code: 0 8862 -08861								
5. Site Land Type (page 14)	Site Land Type: • Private • County • District	Site Land Type: • Private • County • District • Federal • Indian • Municipal • State • Other								
6. North American Industry Classification	A. 325120 B.									
System (NAICS) Code(s) for the Site (page 14)	C.	D.								
7. Site Mailing Address	Street or P. O. Box: 475 ROUTE 9									
(page 15)	City, Town, or Village: WOODBRIDGE									
	State: NJ	· · · · · · · · · · · · · · · · · · ·								
	Country: U. S.		Zip Code: 070							
8. Site Contact Person	First Name: WILLIAM	MI:	Last Name: GOOL	DLIFFE						
(page 15)	Phone Number: 732-634-7500 Extension	n: 26	Email address: NO	NE						
9. Operator and Legal Owner of the Site	A. Name of Site's Operator: ACETYLENE SUPPLY COM Operator Type: • Private • County • District		Date Became Operator (mm/dd/yyyy): 03/01/1982							
(pages 15 and 16)	B. Name of Site's Legal Owner: CUSTOM DISTRIBUTION Owner Type: Private • County • District	Date Became Owner (mm/dd/yyyy): PRIOR TO 1982 • Indian • Municipal • State • Other								
	L									

EPA ID NO: .)2)2))2)2))2)2))2)2)-	OMB#: 2050-0028 Expires 1/31/200
9. Legal Owner	Street or P. O. Box: PO BOX 3	63
(Continued) Address	City, Town, or Village: PERTH AM	180Y 2005 MAR 30 PM 12: 31
, , , , , , , , , , , , , , , , , , , ,	State: NJ	200 - 200
	Country: V.S.	Zip Code: 08862
10. Type of Regulated Mark "Yes" or "No		es as instructed. (See instructions on pages 17 to 20.)
A. Hazardous Was Complete all pa	rte Activities rts for 1 through 6.	
	of Hazardous Waste noose only one of the following - a, b, or c.	Y ••N• •2. Transporter of Hazardous Waste
• •a. LQG:	Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or	Y • • • • • • 3. Treater, Storer, or Disposer of Hazardous Waste (at your site) Note: A hazardous waste permit is required for this activity.
	of non-acute hazardous waste; or QG: Less than 100 kg/mo (220 lbs./mo.)	Y • ••••••••••••••••••••••••••••••••••
In addition, i	of non-acute hazardous waste ndicate other generator activities.	Y • N • 5. Exempt Boiler and/or Industrial Furnace If "Yes", mark each that applies.
	d States Importer of Hazardous Waste	 • a. Small Quantity On-site Burner Exemption • b. Smelting, Melting, and Refining Furnace Exemption
		Y • • • • 6. Underground Injection Control
B. Universal Wast	e Activities	C. Used Oil Activities
5,000 kg or determine waste gene	ntity Handler of Universal Waste (accumulate more) [refer to your State regulations to what is regulated]. Indicate types of universal erated and/or accumulated at your site. If "Yes xes that apply:	Mark all boxes that apply. Y ••N •1. Used Oil Transporter If "Yes", mark each that applies. • • a. Transporter • • b. Transfer Facility
a. Batteries b. Pesticides	Generate Accumulate • • • • •	Y ••N• •2. Used Oil Processor and/or Re-refiner If "Yes", mark each that applies. • •a. Processor • •b. Re-refiner
c. Thermosta d. Lamps	• • • • • • • • • • • • • • • • • • •	Y • • • • • 3. Off-Specification Used Oil Burner
e. Other (spe f. Other (spe		Y • N • 4. Used Oil Fuel Marketer If "Yes", mark each that applies. • • a. Marketer Who Directs Shipment of

g. Other (specify) _

Y • •N • •2. Destination Facility for Universal Waste

Note: A hazardous waste permit may be required for this activity.

Off-Specification Used Oil to Off-Specification Used Oil Burner

Used Oil Meets the Specifications

• • b. Marketer Who First Claims the

EPA ID NO:)2)2))2)2)-	.)2)2))2)2)-		OMB#: 2050-0028	Expires 1/31/200
11. Description of	f Hazardous Wastes	(See instruction	s on page 21.)		ACC.	WAR THE T
handled at y	es for Federally Regular site. List them in lige if more spaces are	the order they are	wastes. Please lipresented in the re	ist the waste codes gulations (e.g., D00	of the Federal hazard 1, D003, F007, U112)	ous wastes . Use an
DØØ9		*				
		(1447)				

hazardous w	es for State-Regulate astes handled at your are needed for waste	site. List them in	the order they are	nstes. Please list the presented in the reg	e waste codes of the ulations. Use an add	State-regulated itional page if
			 			
12 Comments (S	ee instructions on p	24)				
	ASTE 15 G					
	LOFAC			TING MA	TERIAL	
(TRADE	NAME MON	IKEY DU.	ST) _e			
	1014 100 ₄ .					W.F
		- 1000 mm - 1972				**************************************
7.7.		M				
				·	7.00	
	480			75.50		
on my inquiry of the information submitt penalties for submit	a system designed to e person or persons we ed is, to the best of m tting false information ardous Waste Part A	assure that qualitho manage the sy y knowledge and , including the pos	fied personnel propo ystem, or those pers belief, true, accurat ssibility of fine and in	erly gather and eval sons directly respon e, and complete. I a mprisonment for kno	pared under my directing the information solution in a sible for gathering the maware that there are owing violations. In (see 40 CFR 270.10)	ubmitted. Based information, the e significant
Signature of opera		Name and Offic	cial Title (type or p	rint)		Date Signed (mm/dd/yyyy)
1/8		WILLIA	M GOODI	IFFE, PR	ESIDENT	03/29/05
	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -					
						<u> </u>



163 Stockton Street, Hightstown, New Jersey 08520

Phone (609) 490-0400 or (800) 336-1226 Fax (609) 490-9544 e-mail: greentre@worldnet.att.net

March 29, 2005

USEPA Region II 290 Broadway, 22nd Floor New York, NY 10007-1866 Via Federal Express

Attn: Jack Hoyt

RE: Application for EPA ID Number for:

Acetylene Supply Co., Perth Amboy, Middlesex County, NJ

Dear Mr. Hoyt:

As per our telephone conversation today, and on behalf of the Acetylene Supply Company (ASCO), enclosed please find a completed EPA Form 8700-12 for the ASCO facility located at 1050 State Street, Perth Amboy, NJ.

Upon issuance of the assigned EPA ID Number, it would be greatly appreciated if you could please fax a copy of the assigned ID number for ASCO to my attention at fax # 609-490-9544.

Your assistance in this regard is appreciated. If you have any questions on the enclosed form, please contact me directly at (609) 490-0400.

Very truly yours,

GREENTREE CONSULTING, INC.

Kenneth H. Mueller, Esq., CEI

Director

Environmental Services

c: Mr. W. Goodliffe, President -ASCO w/enclosure

Environmental

Safety, Fire and Health

Training

Construction Administration

* Report run on: March 31, 2005 - 10:09 AM

EPA Region 02 Extract Flag: X Facility Ident	-	
Basic Notes: EXTRACT_FLAG UPDATED OCT 2003 VIA S	QL	
Universes Generator: N BOYSNC: Transporter: SNC: Annual BOY Enf:	Subj CA: Subj CA TSD 3004: Subj CA TSD Discr: Subj CA Non-TSD: CA Wrkld:	Perm Prgrs: Op Pmt GPRA: Perm Wrkld: PClos GPRA: Clos Wrkld: CA GPRA: Pclos Wrkld: CA HE EI: Controls in Place: No CA GW EI:
Activity Location: NJ Source Type: Implementer	Seq. Number: 1	Receive Date: 08 JUL 1999
Other/Previous Site Name: BROWNING CHEMICAL		
Location 1050 STATE ST Address: PERTH AMBOY, NJ 08861	Mailing Address:	707 W CHESTER AVE WHITE PLAINS, NY 10604
Land Type: Bad code - Non Notifier: No Accessibility: No. Employees:	Commercial Availa State District: CEN	
Notes: Update 10/03 to ensure Leg_Dist is associated with on Regulated Waste Activities Hazardous Waste Generator Status - Federal: Not a General		lor
Transfer Facility: Unknown	Used Oil Activities	
Other Hazardous Waste Generator Activities	Used Oil Transporter Activ	rity Off-Specification Used Oil Burner: N
Importer Activity: Unknown Mixed Waste Generator: Unknown	Transporter: Transfer Facility:	No Used Oil Fuel Marketer Activity
Transporter Activity: No TSD Activity: No	Used Oil Processor and/or Re-refiner Activity	Marketer who directs shipment off-specification used oil to off-specification used oil burner:
Recycler Activity: No	Processor: Refiner:	No Marketer who first claims the used No oil meets the specifications:
Exempt Boiler and/or Industrial Furnace Small Quantity Onsite Burner Exemption: Smelting, melting, Refining Furnace Exemption: Unknown	Underground Injection Control:	Destination Facility for No Universal Waste:
Activity Location: NJ Source Type: Notification	Seq. Number: 1	Receive Date: 03 JUN 1987
Other/Previous Site Name: BROWNING CHEMICAL		
Location 1050 STATE ST Address: PERTH AMBOY, NJ 08861	Mailing Address:	707 W CHESTER AVE WHITE PLAINS, NY 10604
Contact Person FRED BROWNING 1050 S	STATE ST H AMBOY, NJ 08861	
Contact Person FRED BROWNING 1050 S For Source (914) 686-0300 PERTI Information Owner (current) BROWNING CHEMICAL		Type: Private Phone: (212) 555-1212
Contact Person FRED BROWNING 1050 S For Source (914) 686-0300 PERTI Information Owner (current) BROWNING CHEMICAL	H AMBOY, NJ 08861 NOT REQUIRED	Phone: (212) 555-1212

March 31, 2005 - 10:09 AM

Page 4

NJD982187536 BROWNING CHEMICAL

Continued...

Regulated Waste Activities

Hazardous Waste Generator Status - Federal: Large Quantity Generator; State:

Transfer Facility: Unknown		Used Oil Activities							
Other Hazardous Waste Generator Activities		Used Oil Transporter Activity	***************************************	Off-Specification Used Oil Burner:	No				
Importer Activity: Mixed Waste Generator:	Unknown Unknown	Transporter: Transfer Facility:	No No	Used Oil Fuel Marketer Activity					
Transporter Activity: TSD Activity:	No No	Used Oil Processor and/or Re-refiner Activity		Marketer who directs shipment off-specification used oil to off-specification used oil burner:	No				
Recycler Activity: Exempt Boiler and/or Industrial Furnace	No	Processor: Refiner:	No No	Marketer who first claims the used oil meets the specifications:	No				
Small Quantity Onsite Burner Exemption: Smelting, melting, Refining Furnace Exemption:	Unknown Unknown	Underground Injection Control:	No	Destination Facility for Universal Waste:	**************************************				

Description of Hazardous Wastes (as reported on Site Identification Form)

EPA Waste Codes: D002

^{*} End of Report *